AGENCY OF HUMAN SERVICES

INTEGRATING FAMILY SERVICES

Strategic Plan and Work Plan February 2015 through June 2016

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Introduction to Strategic and Work Plan

- > These plans are intended to assure the IFS Management Team, IFS Senior Leadership Team, IFS Implementation Team and current and future IFS communities are pulling in the same direction.
- > The strategic plan helps to operationalize the IFS theory of change (see the document entitled "Building Blocks for Change"), and it provides the big picture to inform the work plan.
- > The work plan provides more detail specific to the eight elements of the IFS model. While each element has its own priorities, all eight elements are inter-related. Progress in one area will depend in part on progress in other areas.
- > Both of these documents will be updated as needed to reflect current conditions, lessons learned and new thinking.
- ➤ If you have questions about these plans please contact any member of the IFS management team with your thoughts: Cheryle Bilodeau, IFS/AHS Director, Cheryle.Bilodeau@state.vt.us, 802-760-9171; Susan Bartlett, AHS Special Projects, Susan.Bartlett@state.vt.us, 802-917-4852; Carol Maloney, AHS Director of Systems Integration, Carol.Maloney@state.vt.us, 802-279-6677.



The Agency of Human Services Outcomes

The following outcomes direct the work of the Agency and were enacted by the Vermont Legislature in 2014 through Act 168, an act relating to reporting on population-level outcomes and indicators and on program-level performance measures. (The full act can be found at: http://www.leg.state.vt.us/DOCS/2014/ACTS/ACT186.PDF). This act was passed for the General Assembly to obtain data-based information to know how well State government is working to achieve the population-level outcomes the General Assembly sets for Vermont's quality of life, and will assist the General Assembly in determining how best to invest taxpayer dollars.

- 1. Vermont has a prosperous economy.
- 2. Vermonters are healthy.
- 3. Vermont's environment is clean and sustainable.
- 4. Vermont's communities are safe and supportive.
- 5. Vermont's families are safe, nurturing, stable, and supported.
- 6. Vermont's children and young people achieve their potential, including:
 - a. Pregnant women and young people thrive.
 - b. Children are ready for school.
 - c. Children succeed in school.
 - d. Youths choose healthy behaviors.
 - e. Youths successfully transition to adulthood.
- 7. Vermont's elders and people with disabilities and people with mental conditions live with dignity and independence in settings they prefer.
- 8. Vermont has open, effective, and inclusive government at the State and local levels.

The bold, italicized outcomes were incorporated into how the IFS approach will be measured

IFS Outcomes: How the IFS Approach is Viewed and Measured at All Levels

The items in brackets need further clarification which will occur in the Accountability and Oversight Work Group

IFS Vision	Vermonters work together to ensure all children, youth and families have what they need to reach their full potential.			
IFS Mission	Integrating Family Services brings state government and local communities together to ensure holistic and accountable planning, support and service delivery aimed at meeting the needs of Vermont's children, youth and families.			
IFS Outcomes	a. Pregnant women and young children thrive/Children are ready for school	b. Families are safe,stable, nurturing andsupported	c. Youth choose healthy behaviors/Youth successfully transition to adulthood	d. Communities are safe and supportive
Population Indicators	 a. % of women who receive first trimester prenatal care b. [children meeting developmental milestones/screenings] c. [% of children ready for school] d. [% of children and youth with a medical home] 	 a. Rate of child abuse and neglect b. [substance abuse measure?] c. [parents having skills they need to be successful parents] d. [parents having concrete supports in times of need] 	 a. % of adolescents who feel valued by their community b. % of students with plans for education, vocational training, or employment following high school c. [youth engaging in healthy behaviors – physical activity and nutrition?] d. [a school-aged children indicator] e. [substance abuse measure?] 	 a. % access to safe and supervised early childhood and out of school care b. [housing indicator] c. [% of families who have experienced homelessness in the past year] d. [% of families who are food insecure]
IFS Performance Measures	 [% of clients with a plan of care developed collaboratively with families, and that includes needs identified through standardized screenings, assessments, evaluations, and/or care information summary] [% of families that have shown improvement on a standardized assessment tool] [a measure that demonstrates level of satisfaction from family perspective] 			
	4. [measure that demonstrates quality execution of plan of care (e.g., timeliness, appropriateness, evidence-informed)]			

Strategic Plan ~ FY2016-FY2020

See the Building Blocks for Change document for additional detail

IFS Vision: Vermonters work together to ensure all children, youth and families have what they need to reach their full potential.

IFS Mission: Integrating Family Services brings state government and local communities together to ensure holistic and accountable planning, support and service delivery aimed at meeting the needs of Vermont's children, youth and families.

FY2016-FY2017	I.	IFS' vision, goals and strategies are clearly communicated.
	II.	Additional communities are supported in creating local governance agreements to prepare for IFS expansion.
	III.	State and community partners utilize population indicators as a way to drive decision-making and identify gaps in services.
	IV.	Integrating Family Services (IFS) grantees are held to common outcomes and performance measures.
	V.	State and community partners, in collaboration with people who receive supports and services, work to create effective communications strategies and systems.
	VI.	State and community partners develop a consistent and replicable financing model that connects health, human services and education systems.
	VII.	State and community partners report increased administrative efficiencies and flexible and coordinated service delivery.
FY2018-2019	I.	State and community partners show improved outcomes for Vermont's children and families.
	II.	Community partners work collaboratively and effectively to use funds flexibly to meet the identified needs of children, youth and
		families.
	III.	Planning at the state and regional level is driven by a holistic and collaborative perspective of Vermont's children, youth and families service delivery system and community supports.
	IV.	Policies cut across AHS department lines in ways that promote seamless service delivery to children, youth and families that build on strengths in each community.
FY2020	I.	All AHS regions have implemented the IFS approach.
	II.	Families understand and can easily access supports and services they need regardless of geography, income or type of need.
	III.	Policymakers and service providers use data to drive policy decisions and reallocate resources to most effectively meet the needs of
		Vermonters.

Implementation of Work Plan

Element	Modality	Chair(s)	
Accountability and Oversight	Work Group	Cheryle Bilodeau, Sarah Merrill and Keith Grier	
Ensure the various aspects of effective IFS accountability and oversight are being implemented consistently and broadly			
Financing and Payment Reform	Work Group	Susan Bartlett	
Articulate and implement specific strategies that permit flexible and innovative use of funds			
Community-Based Prevention and Promotion	Work Group	Carol Maloney and Charlie Biss	
Identify and align whole-population and systems-wide frameworks, policies and practices that inform service delivery with an eye towards consistency and seamlessness			
State and Local Service Delivery	Work Group	Cheryle Bilodeau, Jill Evans and Belinda Bessette	
Determine community-based responses that reflect specific needs highlighted by community-level data and the key components of the IFS model			
Leadership and Governance	Work Group	Carol Maloney, Mary Moulton and Terri Edgerton	
Ensure the primary constituencies needed for successful implementation are actively engaged and clear on their roles and responsibilities			
Data and Technology	Ad hoc groups are occurring as n	eeded, convened by the IFS Management Team	
Human Resources and Organizational Structure	IFS Management Team is responsible for with support and assistance from partners		
Communications	Embedded across all work group	S	

To see the list of work group members please go to http://humanservices.vermont.gov/Integrating-Family

Integrating Family Services Work Plan February 2015 through June 2016

GOAL	POSSIBLE ACTION STEPS	TEAM OR GROUP RESPONSIBLE	COMPLETION DATE		
ACCOUNTABILITY AND OVERSIGHT					
There is a system in place to measure performance There is a clear communication system in place that is used to share data, outcomes and performance measures	 a. Population Indicators are established: i. Stakeholder meetings convened ii. SLT and I-Team review indicators iii. Indicators are confirmed b. IFS systems-level Performance Measures are established: i. Use IFS guiding principles to inform whatever assessment or survey is used to measure our progress in building strong relationships inclusive of the state, regions, and local agencies under IFS ii. Stakeholder meetings convened iii. SLT and I-Team review indicators iv. Indicators are confirmed a. Create common data profiles for each IFS region (coordinate with Vermont Insights) 	Accountability and Oversight Work Group Accountability and Oversight Work Group			
3. RBA concepts and practices are broadly understood and used at state and local levels 4. There is a system in place to	 a. Trainings on RBA are coordinated and accessible to state and community partners b. Utilize RBA data to find solutions to high pressure systems issues (e.g. for the residential bed shortage in VT and New England) a. Quality Case Reviews are conducted in active IFS regions: 	Accountability and Oversight Work Group Quality Case Review	Feedback on		
monitor performance	 i. Case Review in Addison to be held on 1-29-15 ii. Case Review in Franklin to be held on 2-18-15 b. Each active IFS region utilizes a client satisfaction survey that ensures there is room for additional regional input 	Work Group	quality case reviews is provided to regions within 60 days of date of case review.		

GOAL	POSSIBLE ACTION STEPS	TEAM OR GROUP RESPONSIBLE	COMPLETION DATE
5. There are consistent practices and processes across IFS with the intent of improving performance	 a. Consider how to use AHS strategies (RBA Turn the Curve, Agency Improvement Model (AIM) and Plan-Do-Study/Check-Act (PDSA/PDCA)) to improve performance—build on what we are already doing b. Technical Assistance is provided to IFS regions c. Clear, documented process for T/A and oversight to IFS regions is created which makes the oversight entity clear. d. IFS population indicators and performance measures are in all relevant documents (e.g. grant/contract, Manual, guidance documents?) 	Implementation Team	